

PATENT APPLICATION DATA ENTRY FORMAT

Inventor Information

Inventor One Given Name: Lisa
Middle Initial: Lynn
Family Name: Shafer
Name Suffix:
Postal Address Line One: 12563 62nd Street North
Postal Address Line Two:
City: Stillwater
State or Province: MN
Postal or Zip Code: 55082
Country of Citizenship: United States of America

Inventor Two Given Name:
Middle Initial:
Family Name:
Name Suffix:
Postal Address Line One:
Postal Address Line Two:
City:
State or Province:
Postal or Zip Code:
Country of Citizenship:

Inventor Three Given Name:
Middle Initial:
Family Name:
Name Suffix:
Postal Address Line One:
Postal Address Line Two:
City:
State or Province:
Postal or Zip Code:
Country of Citizenship:

Correspondence Information

Correspondence Customer Number: 27581
Electronic Mail: keith.m.campbell@medtronic.com

Application Information

Title Line One: Device and Method For Attenuating An Immune Response
Title Line Two:

Title Line Three:
Total Drawing Sheets: 26
Formal Drawings?: ☒ Yes ☐ No
Application Type: Utility
Attorney Docket Number: P-21023.00US

Representation Information

Representative Customer Number: 27581

Continuity Information

This application is a:
>>Application One:
Filing Date:
Patent Number:
Which is a:
>>Application Two:
Filing Date:
Patent Number:
Which is a:
>> Application Three:
Filing Date:
Patent Number:

Prior US Applications

US Application One: 60/507,855
Filing Date: October 1, 2003
Priority Claimed?: ☒ Yes ☐ No

Prior Foreign Applications

Foreign Application One:
Filing Date:
Country:
Priority Claimed?: ☐ Yes ☐ No

Assignee Information for Inclusion on the Patent Application Publication

Assignee: Medtronic, Inc.
Address: Minneapolis, Minnesota